								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOI Effective October 1, 2004									10/605260				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			I I		194			RATE FEE		7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		l -	BASIC FEE 395.00		100	BASIC FEE	 	
TOTAL CHARGEABLE CLAIMS			minus 20=		•			Ve 26		1	1150		
INDEPENDENT CLAIMS					•		-	X\$ <i>2</i> 5: — —		OR	 		
MULTIPLE DEFENDENT CLAIM PR			ninus 3 =					X kg)=		OR	X200=	÷	
-		TOLITI COMP	RESENT			+150		+150=		OR	+300=		
* (f	the difference	e in column 1 is	less than zero, enter "0" in column 2			-	TOTAL		OR	TOTAL			
CLAIMS AS AMENDED - PART II							-	:		-	OTHER	THAN	
		(Column 1)	,	(Colun		(Column 3)	SMALL		ENTITY	OR	SMALL	ENTITY	
AMENDMENTA	1-7-05	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	SER SUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI TIONAL FEE	
	Total	. 23.	Minus	- 2	3	=		X25=		OR	X\$50=		
	Independent	- ()	Minus	*** 5	<u></u>	= /	. ,	X140:		OR	X200=	200 W	
<	FIRST PRESENTATION OF MU		JETIPLE DEPENDENT		CLAIM	CLAIM				UR		200	
							Ĺ	150=	·	OR	4300=	715	
							ADA	ADDIT. FEE			OR ADDIT. FEE		
		(Column 1) CLAIMS		(Column 2) HIGHEST		(Column 3)	·		·	· ,			
AMENDMENT B		REMAINING AFTER AMENDMENT		EMUM CIVERA A DIAG	ER USLY	PRESENT EXTRA	F	KATE ,	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	·	Minus	strá		=	5	(E =)		OR	XS50=	- 44	
	Independent	t	Minus	***		=)	(100=		OR	X200=		
۷	FIRST PRESE	NTATION OF MU	LTIPLE DEPENDENT CL					-		UH			
	-			-		160		150=		OR	+300=		
								TOTAL OT, FEE		OR,	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3													
≤1		CLAIMS REMAINING AFTER - AMENOMENT		HIGHE NUMB PREVIOU PAID F	er Usly	PREȘENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total .	•	Minus ·	**		=	X	25!=		OR	X\$50=		
	Independent	•	Minus	. ***		.	-			f	X200:		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						·	100 =		OR	<i>∧20</i> :		
								150=	,	OR	+300=		
* If the entry in column 1 is less than the entry in column 2, write "O" in column 3. *If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **ADDIT. FEE ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest n'enter of found in the appropriate box in column 1													
. 1	he "Highest Num	ber Previously Paid	For (Total or	Independer	u) is the	highest rimmt er	found in	the app	ropriate box	in cotu	ma 1	• 1	

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